NCHP 8/11/4

(Rev. 10-90) NPS Form 10-900

OMB No. 1024-0018

United States Department of the Interior National Park Service

NATIONAL REGISTER OF HISTORIC PLACES REGISTRATION FORM

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in How to Complete the National Register of Historic Places Registration Form (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer, to complete all items.

1. Name of Property	
historic name Grace Hospital	
other names/site number VDHR File #	127-5459
2. Location	
street & number 401 West Grace Street	Not for publication N/A
city or town Richmond	vicinity N/A
state Virginia code VA county (Independen	t city) code 760 zip code 23219
3. State/Federal Agency Certification	
As the designated authority under the National Histor	ic Preservation Act of 1986, as amended I hereby
certify that this _X nomination request for det	
standards for registering properties in the National Re	egister of Historic Places and meets the procedural
and professional requirements set forth in 36 CFR Pa	ert 60. In my opinion, the property. Y meets
does not meet the National Register Criteria. I recom	
nationally statewide _X_ locally. (See of	continuation cheet for additional comments.)
rationally statewide locally. (See t	confinuation sheet for additional comments.)
Mill atturn Serson	6/28/2004
Signature of certifying official Date	
Virginia Department of Historic Resources	
State or Federal agency and bureau	
In my opinion, the property meets does	s not meet the National Register criteria. (See
continuation sheet for additional comments.)	
Signature of commenting or other official	Date
State or Federal agency and bureau	
4. National Park Service Certification	
I, hereby certify that this property is:	
entered in the National Register	
See continuation sheet.	
determined eligible for the	
National Register	Signature of Keeper
See continuation sheet.	
determined not eligible for the National Register	Data of Astion
removed from the National Register other (explain):	Date of Action

NPS Form 10-900					OMB No. 1024-401
(Rev. 10-90) U. S. Department	of the Interior				C
National Park Serv				401 W. Grace Stree	Grace Hospita t, Richmond, VA
5. Classification					
Ownership of Pro		many boxe	es as apply)		
X privat		-			
public					
public					
public	:-Federal				
Category of Prope	erty (Check only o	one box)			
X buildi	ng(s)	,			
distric	at The Control of the				
site					
struct					
object	t				
Number of Resou	rces within Prop	erty			
	Noncontributing	•			
1	0 buildings				
0	0 sites				
0	0 structures				
0	0 objects				
1	0 Total				
Number of contribu	iting resources pro	eviously lis	sted in the National	Register 0	
ivame of related mu	imple property listii	ng (Enter	N/A" if property is r	not part of a multiple prop	erty listing.) <u>N/A</u>
6. Function or Use	B				
Historic Functions		s from ins	•		
Cat: HEALTH C	;ARE	Sub:	hospital		
Current Functions	(Enter categorie	s from inst	ructions)		
Cat: HEALTH C		Sub:	vacant		
7. Description					
Architectural Clas	sification (Enter	categories	from instructions)		
LATE 19 TH AND 20	TH CENTURY RE	VIVALS: C	Colonial Revival; M	ODERN MOVEMENT: M	oderne
Materials (Enter ca	ateuories from ins	tructions)			
Foundation	stone; concrete	,			
Roof	asphalt				
Walls	brick; stone; me	tal; concre	te		
Other	·				

Narrative Description (Describe the historic and current condition of the property on one or more continuation sheets.)

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Grace Hospital 401 W. Grace Street, Richmond, VA

	nt of Significance			
Applicable Notional F	lational Register Criteria (Mark "x" in one or more boxes for the criteria qualifying the property Register listing)			
ХА	Property is associated with events that have made a significant contribution to the broad patterns of our history.			
X C	Property is associated with the lives of persons significant in our past. Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.			
D	Property has yielded, or is likely to yield information important in prehistory or history.			
Criteria Con	siderations (Mark "X" in all the boxes that apply.)			
A	owned by a religious institution or used for religious purposes.			
B	removed from its original location.			
c	a birthplace or a grave.			
D	a cemetery.			
E	a reconstructed building, object or structure.			
F	a commemorative property.			
G	less than 50 years of age or achieved significance within the past 50 years.			
Areas of Sig	nificance (Enter categories from instructions) HEALTH/MEDICINE; ARCHITECTURE			
Period of Sig	gnificance 1911-1954			
Significant [Dates 1911; 1930			
Significant F	Person (Complete if Criterion B is marked above)			
Cultural Affi	liation			
Architect/Bu	Charles Morrison Robinson, architect (1911 campaign) Henry E. Baskervill, architect (1930 campaign) Samuel N. Mayo, AIA (1964 campaign)			

Narrative Statement of Significance (Explain the significance of the property on one or more continuation sheets.)

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Grace Hospital 401 W. Grace Street, Richmond, VA

9 Major Pibliographical Potaronese	
9. Major Bibliographical References Bibliography	
(Cite the books, articles, and other source	ces used in preparing this form on one or more continuation sheets.)
Previous documentation on file (NPS preliminary determination of individual previously listed in the National Region previously determined eligible by the designated a National Historic Land recorded by Historic American Build recorded by Historic American Engineerican Engineer	ual listing (36 CFR 67) has been requested. pister e National Register Imark tings Survey #
Primary Location of Additional Data _X_ State Historic Preservation OfficeOther State agencyFederal agencyLocal governmentUniversityOther Name of repository: Virginia Departmen	t of Historic Resources
10. Geographical Data	
Acreage of Property 0.495	
UTM References (Place additional UTM	// references on a continuation sheet)
A 18 283857 4158349 Zone Easting Northing	В
С	D
See continuation sheet.	
Verbal Boundary Description (Describ	be the boundaries of the property on a continuation sheet.)

Boundary Justification (Explain why the boundaries were selected on a continuation sheet.)

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Grace Hospital 401 W. Grace Street, Richmond, VA

11. Form Prepared By

name/title:

Nancy W. Kraus

Organization: First & Main. LLC

date March 22, 2004

street & number: 6224 New Harvard Lane

telephone (804) 304-6053

city or town Glen Allen

state VA

zip code 23059

Additional Documentation

Submit the following items with the completed form:

Continuation Sheets

Maps

A USGS map (7.5 or 15 minute series) indicating the property's location.

A sketch map for historic districts and properties having large acreage or numerous resources.

Photographs

Representative black and white photographs of the property.

Additional items (Check with the SHPO or FPO for any additional items)

Property Owner

(Complete this item at the request of the SHPO or FPO.)

name Herbert R. Coleman, III, and Hugh T. Shytle

street & number 5201 Harvest Glen Drive

telephone (804) 762-7012

city or town Glen Allen

state VA

zip code 23059

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C. 470 et seq.). Estimated Burden Statement: Public reporting burden for this form is estimated to average 18.1 hours per response including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, P.O. Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget, Paperwork Reductions Project (1024-0018), Washington, DC 20503.

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Grace Hospital 401 West Grace Street, Richmond, VA

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SUMMARY DESCRIPTION

Grace Hospital, composed of three architecturally distinct attached units, dominates the southwest corner of West Grace and Monroe Streets. Located near the western edge of Richmond's central business district, the former city hospital is surrounded by properties listed on the National Register of Historic Places. The hospital is adjacent to the Commonwealth Club Historic District (VDHR #127-0373) one-and-one-half blocks west of the Grace Street Commercial Historic District (VDHR # 127-0857), four blocks east of the West Franklin Street Historic District (VDHR # 127-0228) and one block south of the Broad Street Commercial Historic District (VDHR #127-0375). In its earliest form, the hospital was graciously situated among the substantial late 19th-century and early 20th-century residences along Franklin and Grace Streets. Modest in scale, the 1911 structure would have blended compatibly with the fabric of the surrounding residential neighborhood. Although the distinguished Commonwealth Club and many large-scale mansions survive on Franklin Street, most of the historic dwellings on Grace Street between Capital Square and Belvidere Street were either substantially altered for commercial use or demolished and replaced by small-scale commercial buildings between 1920 and 1930. Essentially tripled in size by additions in 1930 and 1964. Grace Hospital is now an imposing presence in what was once described as the most desirable residential neighborhood in Richmond.

Three different building campaigns are easily discerned. The three-story main body, with its stately entrance pavilion on West Grace Street, is a dignified and imposing example of Colonial Revival architectural style. Although moderately asymmetrical, the original hospital block is characterized by its formal composition in Flemish bond and granite with handsome classical detailing. Distinguishing features include raised basement-story, paired lonic columns, pedimented entrance, deep cornice with modillions, double-hung sash, and gauged arches. The first of two additions extended the original hospital to the south along Monroe Street to the rear alley. Viewed from the cast, the five-story addition overshadows the original hospital. This 1930 addition, constructed in Flemish bond with pre-cast concrete base, belt coursing, lintels and sills, presents a subdued imitation of the earlier classical design. In stark contrast, the 1964 addition to the west along Grace Street exhibits a modern three-story, brick and concrete façade. Angular and devoid of ornamentation, the west wing projects a modern, utilitarian character. The hospital retains a high degree of historic fabric and integrity.

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ARCHITECTURAL ANALYSIS

Grace Hospital occupies a gently sloping, one-half acre corner lot. Rectilinear in shape, the parcel is bounded by Grace Street to the north, Monroe Street to the east, and the alley parallel to and midway between Grace and Franklin Streets to the south. To the west, the hospital abuts 413 West Grace Street, a one-story commercial structure constructed in 1959 to house a pharmacy. In its current form, the ell-shaped hospital occupies approximately three-fourths of the land parcel. An asphalt parking lot behind the building covers the balance of the lot. On the north and east elevations, a relatively narrow city sidewalk with granite curbing separates the hospital from the street. There is minimal vegetation in the 400 block of West Grace Street, but a developing row of maple trees soften the appearance of the massive east façade.

Designed by noted architect Charles M. Robinson and constructed in 1911, Grace Hospital is an excellent surviving example of Colonial Revival (sometimes referred to as Georgian Revival) architectural style. Popular in American between 1700 and 1800, Georgian design was typified by strict symmetry, balanced proportions, and Classical detailing.³ Prominent characteristics often included a pedimented projecting bay or pavilion, centrally-placed entrance, massive columns or pilasters, Palladian or Venetian windows, sliding sash windows with between 6 and 20 lights in one sash, and modillioned cornice.⁴

Following America's centennial, public interest in colonial architecture stimulated a rebirth of Georgian and Federal design elements. In the same year that Grace Hospital was built, Jonathan Bryan, son of Joseph Bryan, constructed "Nonchalance" (later re-named The Hermitage, VDHR #127-5895-0222), another outstanding example of early twentieth-century Colonial Revival architectural style. Between 1910 and 1930, the Colonial Revival style found full expression in the Laburnum Park Historic District, with 160 of 237 representatives. Just west of Grace Hospital along West Franklin Street, the popularity of Colonial/Georgian Revival design is apparent in numerous contemporaneous buildings: residences at 810, 910, 922, 1013, 1015; 1022-1024; 1026, 1101; 1111; First Independent Church at 824; Chesterfield Apartments at 900; Sherer Hall at 923; Baptist Hall at 1103; and Beth Ahabah Congregation Hall at 1109.

Although well-proportioned, the hospital lacks the rigid symmetry generally associated with the precedent Georgian architectural style. Placement of a five-sided projecting bay at the eastern corner of the front façade deviates from the strict academic approach of earlier Georgian design and exemplifies the increased freedom of expression of the Colonial Revival-style popular in Richmond between 1890 and 1930. The hospital is set upon a raised basement of rusticated granite delineated by a limestone Lelt course. The basement-story exhibits square window openings. Three stories high, the building envelope is composed of Flemish bond brickwork with glazed headers and struck mortar joints, limestone lintels and sills, and double-hung, wood windows. The north and east

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elevations are distinguished by a broad galvanized metal entablature with plain frieze and modillions. Above the cornice, the low-pitched roof is invisible behind a low parapet with stone coping. On the primary north façade, a two-story central portico is the hospital's most dominant architectural feature. The portico features rusticated granite base, majestic, paired Ionic columns, and unadorned entablature. A classical balustrade, shown on the original architectural drawings and in a 1937 newspaper photograph, is now missing. The main entrance is approached by an identical pair of semi-circular granite stairs with decorative wrought-iron railing. Beneath the portico, the entrance displays engaged Doric columns, pediment with triangular pediment and tympanum, and entablature embellished with triglyphs. A multi-light wood transom survives, but the historic double-leaf wood doors and side-lights have been replaced with a modern aluminum-and-glass commercial door system. Fenestration is composed of mostly 6/1 and 8/1 sash-style windows. Windows in the eastern bay and above the portico are the 6/1 prototype. The remainder of the windows on the north façade are 8/1. The ten-bay wing along Monroe Street displays an unbalanced arrangement of windows on all three stories. From north to south, fenestration consists of two pairs of 6/1 windows; two pairs of 8/1 windows; sets of three smaller 1/1 and 2/1 windows; and three sets of 8/1 windows.

The original hospital was expanded substantially with the construction of two wings, one to the south in 1930 and a second to the west in 1964. Another of Richmond's prominent architects Henry E. Baskervill designed the first addition in a stripped Classical style. Five stories high and five bays wide, the annex is constructed of brick in Flemish bond with glazed headers. The first-story base, belt courses, architrave, lintels and sills are fabricated in pre-cast concrete with simulated Ashlar finish. To provide visual continuity, the belt course separating the fourth and fifth stories is aligned with the cornice of the 1911 structure. Fenestration on all stories consists of a regular rhythm of 3/3 metal sash windows. The addition exhibits a secondary entrance with a smooth architrave carved with the name "Grace Hospital." Protected by a plain metal canopy suspended on chains, the door on Monroe Street once served as the emergency/ambulance entrance.

Samuel N. Mayo, architect, was responsible for the design of two different additions to the hospital in 1964. The starkly modern six-bay wing was appended to the west wall of the original hospital, and a three-bay penthouse was constructed on the roof of the 1930 wing. The three-story Grace Street addition, constructed of light red brick and concrete, is offset from the face of the historic hospital. Structural bays are defined by plain vertical pilasters. The four central bays are evenly spaced, each punctuated with a column of 1/1 metal windows. The eastern-most bay is wider and lacks fenestration on the front façade, although a column of 1/1 metal windows adorn the east-facing wall. The western-most bay is laminated with square, pre-cast concrete panels. Projecting from this bay is a boxy, one-story concrete entrance pavilion with a pair of commercial-style glass doors.

The interior floor plan of the original hospital has been minimally altered through the years. Inside the primary entrance doors, the T-shaped lobby is flanked by formal parlors to the east and west. Several offices are located behind the west parlor. To the rear of the lobby, a cast iron stair, now

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partially enclosed, provides access to the upper floors. Beyond the stair, the double-loaded corridor extends on a straight trajectory through the original hospital into the 1930 addition. Patient rooms are separated from the long corridor by solid, fire-rated wood doors with transoms above. The first floor plan is essentially duplicated on the upper floors, with provision made for offices, lavatories, storage rooms, and procedure rooms. The original hospital sheltered forty-seven patient beds. The 1930 addition incorporated a modern operating suite on the third floor, a clinical laboratory and forty-three additional beds. In the basement, a fracture room, cystoscopic room, dark room, film storage closet, and locker rooms were installed. Surviving fabric and architectural features, including high ceiling planes, fireplace surrounds, terrazzo floors, large windows, and handsome millwork convey a sense of the hospital's historic character. The 1964 annex along Grace Street provided additional space on the first floor for offices, a library, record room and waiting room. On the second and third floors, eight large rooms for patients were incorporated, as well as nursing stations, closets, and pantries. The fourth-story penthouse sheltered two major operating suites, a minor operating room, sterilizing room, recovery room, and an office and dressing room for surgeons.

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8. Statement of Significance

Grace Hospital is eligible for listing in the National Register of Historic places under Criterion A in the area of social history because it is symbolic of a revolutionary period in the history of health care delivery in the City of Richmond. The former city hospital is also significant because it was founded at a time of increased public confidence in healthcare and of dramatic expansion of hospital-based medical care in the United States. The hospital was part of a unique system of small, privately operated hospitals in Richmond, Virginia, constructed in the early decades of the twentieth-century. Grace Hospital was the first fireproof hospital built in Richmond. Also eligible under Criterion C, the former city hospital is a majestic expression of Georgian Revival-style architecture popular in Richmond between 1890 and 1930.

Criteria Statement

Grace Hospital is eligible for listing in the National Register of Historic Places under Criterion A in the area of Health and Medicine because it is symbolic of a revolutionary period in the history of health care delivery in the City of Richmond. Also eligible under Criterion C, the former city hospital is a majestic expression of Colonial Revival-style architecture popular in Richmond between 1890 and 1930.

Historical Background

The Commonwealth of Virginia is preeminent in the history of progressive health-care in America. The first hospital in the New World was constructed following the settlement of Citie of Henricus in 1611. Virginia was also home to the first asylum for the insane and the first operational pharmacy. Numerous "firsts" in surgical procedures are recorded in the comprehensive medical history Medicine in Virginia, completed in three volumes by Wyndham B. Blanton in 1933. The first nursing school in Virginia, the second to be founded in the United States, was located in Richmond. In continuity with this history of "firsts", Grace Hospital was the first fire-proof hospital to be constructed in Richmond. ¹²

The first two decades of the twentieth-century are symbolic of an enduring era of science-based medicine in the United States. The transition to modern medicine is summarized by Charles M. Caravati, M.D., in this way, "as the nineteenth century ended, medicine had begun to be established as a truly scientific profession and the basis of sound medical practice had been laid; the marriage of health-care and research was beginning." Although four small hospitals were located in Richmond around 1900, their bed capacity was small relative to the city population of approximately 85,000. Professional medical and surgical care was delivered by fewer than one-hundred physicians, most of whom practiced from small home-based offices or made house-calls by horse and buggy. ¹⁴ Between 1900 and 1920, an rapid expansion in hospital-related construction occurred

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in Richmond. Ten new private institutions were opened: Hygenia Hospital and the first Richmond Memorial Hospital (1903); Johnston-Willis Hospital (1909); Pine Camp Hospital (1910); The Westbrook Psychiatric Sanatorium (1911); Grace Hospital and St. Elizabeth Hospital (1912); Stuart Circle Hospital (1913); Dooley Hospital and St. Philip's Hospital (1920).¹⁵

The practice of medicine in Richmond early in the twentieth-century appears to have been most positively influenced by the activities of its medical schools and the professional association of practicing physicians known as the Medical Society of Virginia. In 1900, the Medical College of Virginia, founded in 1838, and University College of Medicine, founded in 1893, were responsible both for the training of a large number of the Commonwealth's medical practitioners and for providing the most sophisticated hospital-based medical care available in the region. These medical schools were merged in 1913 and to this day, the resulting Medical College of Virginia, re-named Virginia Commonwealth University College of Medicine in 2004, continues to provide high quality training for prospective physicians and state-of-the-art, technology-based medical-surgical care. The presence of these institutions clearly contributed to the progressive quality of medical practice throughout the Commonwealth. In addition, the Medical Society of Virginia, founded in 1820, renamed Richmond Academy of Medicine in 1866, offered a forum for active physicians to present unusual or difficult cases, to discuss medical problems and solutions, and to offer and to receive assistance in patient care.

The prominence of the medical schools and the progressive activities of the local physicians in Richmond helped to precipitate the development of a network of small, privately owned hospitals. In Medicine in Richmond 1900-1975, Charles M. Caravati states that "The City of Richmond is unique in the manner in which many of the hospitals have been founded, organized, and directed" (p. 58). Unlike the prototypical large, state and municipally-funded public hospitals, "these hospitals were built to care for the private patients of a group of physicians and to meet the local needs where they were the greatest." Historic Grace Hospital, small in scale and residential in character, is symbolic of this unique development in Richmond around the turn of the twentieth century. It must be noted that the burgeoning growth of hospitals was by no means unique to Richmond. Although the population of the United States doubled between 1873 and 1937, the number of hospitals exploded from 149 to 6334, a forty-two fold increase. 17

The land parcel for Grace Hospital was purchased in 1910 from the heirs of David B. Reynolds whose dwelling and barn appear on the plat of the 1876 Atlas of Richmond. Remnants of an antebellum cobblestone alley and a cast iron fence or horse-rest post are visible in 2004 on the hospital site. At the time of construction in 1911, Grace Hospital was privately owned and directed by Doctors Robert C. Bryan and Stuart MacLean. At the opening in May, 1912, the hospital was equipped with up-to-date technology to provide general surgery, in-patient medicine, and obstetrics. The original hospital housed forty-seven patient rooms. In February, 1932, a five-story attached annex expanded the hospital facility to shelter an additional forty-three patient beds, a clinical

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laboratory, and a modern operating suite. In its most active and prosperous period, Grace Hospital operated an accredited School of Nursing, maintained an affiliation in pediatrics with the Medical College of Virginia, and offered a residency-training program approved by the Council on Medical Education and Hospitals. ¹⁹ The nursing school operated between 1912 and 1932 and between 1942 and 1975. In the earliest years, the nurses occupied a pair of ca. 1890 houses at 102 and 104 North Monroe Street. When these houses were demolished and replaced by the 1930 annex, the nurses moved to three spacious dwellings at 407, 409, and 411 West Grace Street. These ca. 1890 houses were demolished in the 1964 building campaign.

In 1929, the hospital was sold to the Henry-Franklin Corporation. This hospital-management company operated the hospital until 1968 when it was sold to Charter Medical Corporation of Macon, Georgia. In 1979, Grace Hospital and nearby St. Elizabeth's Hospital at 617 West Grace Street were closed, replaced by Richmond Metropolitan Hospital at 701 West Grace Street.²⁰ In 1981, Grace Hospital was transformed for use as an adult retirement home. It operated as the Chamblin Memorial Home for Adults between 1981 and 1990 and then as Grace Home in the 1990's. Vacant since 1999, the building was purchased in February 2004, by developers who plan to transform the former hospital into apartments. Curiously, in 1950, Mary Wingfield Scott, noted architectural historian of Richmond, lamenting the loss of historic fabric in this area of Grace and Franklin Streets, concluded that "the only hope for saving the few remaining old ones is that they should be used either by institutions and clubs..., for downtown apartments, or for business offices..."²¹

Grace Hospital is significant for various historical associations. Not only was it the first fire-proof hospital in Richmond, but it was considered to be one of the most modern hospitals in the Commonwealth. The design of Grace Hospital is associated with two of Richmond's best-known architects. The 1911 block was the work of Charles M. Robinson whose name is synonymous with public school design and construction in Richmond between 1910 and 1929. Henry E. Baskervil, architect of the 1930 wing to the hospital, is responsible for much of Richmond's early twentieth-century institutional fabric, including commercial buildings, hospitals, churches, schools, and libraries. Formerly of Noland & Baskervil, he was last affiliated with the architectural firm Baskervil & Son that continues to operate in Richmond in 2004. 22

On a parenthetical note, Major James Dooley, prominent developer and philanthropist of Richmond, died at Grace Hospital on November 16, 1922. ²³ The Richmond Vampire, believed to be the ghost of a William Wortham Poole who died in the collapse of the Church Hill Tunnel in 1925, was treated but died from his injuries at Grace Hospital. ²⁴ Finally, Kimberly Smith, featured on "Unsolved Mysteries" in July, 2002, was abandoned as an infant at Grace Hospital by an unknown woman in 1965. ²⁵

National Register of Historic Places **Continuation Sheet**

Grace Hospital 401 West Grace Street, Richmond, VA

Section 7 and 8, End Notes Page 8

1 "After the War, Grace and Franklin continued to be the most desirable residence streets...The only business that had invaded either street was the first narrow building erected in 1902 by the telephone company..." Scott, Mary Wingfield. Old Richmond Neighborhoods. Richmond, VA: Whittet and Shepperson, 1950, 175. Blumenson, John J.-G. <u>Identifying American Architecture</u>. New York, NY: W.W. Norton & Company, 1977, 19.

Carley, Rachel. <u>The Visual Dictionary of American Domestic Architecture</u>. New York, NY: Henry Holt & Company, 1994. ⁴ Blumenson, John J.-G. <u>Identifying American Architecture</u>. New York, NY: W.W. Norton & Company, 1977, 19. 5 "Laburnum Park Historic District" National Register Nomination Form, Richmond, VA: Virginia Department of Historic Resources, 7-4. 6 "West Franklin Street National Register Nomination Form". Virginia Department of Historic Resources. Richmond, VA, 1-7. Numerous examples of Colonial and Georgian Revival expression may be found in the West Franklin Street Historic District and in the Laburnum Park Historic District. See the Nomination Forms at the Virginia Department of Historic Resources for enumeration and relevant discussion. ⁸ Samuel N. Mayo maintained an office at 2405 Westwood Avenue, Richmond, VA. 9 "Grace Hospital". Survey of Hospital Facilities in Virginia. Richmond, VA: Division of Purchasing, 1947, 141. 10 "Grace Hospital". Richmond, VA: Richmond Times Dispatch, September 8, 1937. "Henricus Historical Park". www.richmondon-line.com. February 29, 2004. "Richmond's Hospitals". Richmond, VA: Richmond Times Dispatch, Sept. 8, 1937. 13 Caravati, Charles M. Medicine in Richmond 1900-1975. Richmond, VA: Richmond Academy of Medicine, 1975, xi. 14 Caravati, Charles M. Medicine in Richmond 1900-1975. Richmond, VA: Richmond Academy of Medicine, 1975, xi. Ward, Harry M. Richmond: An Illustrated History. Northridge, CA: Windsor Publications, Inc., 1985. 16 Caravati, Charles M. Medicine in Richmond 1900-1975. Richmond, VA: Richmond Academy of Medicine, 1975, 58. "Grace Hospital". Richmond, VA: Richmond Times Dispatch, September 8, 1937. ¹⁸ Caravati, Charles M. <u>Medicine in Richmond 1900-1975</u>. Richmond, VA: Richmond Academy of Medicine, 1975, 63. "Grace Hospital". Survey of Hospital Facilities in Virginia. Richmond, VA: Division of Purchasing, 1947, 141.

20 "Two Hospitals Preparing for the Public". Photograph with caption. Richmond, VA: Richmond News-Leader, May 25, 1978. 21 Scott, Mary Wingfield. Old Richmond Neighborhoods. Richmond, VA: Whittet and Shepperson, 1950, 176.

22 Wells, John E. and Robert E. Dalton. The Virginia Architects 1835-1955: A

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Excerpt from www.maymont.org, 2004.
www.virginiaghosts.com/vampire-update.htm.

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9. Bibliography

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10. GEOGRAPHICAL DATA

Verbal Boundary Description

The boundaries of the nominated parcel are portrayed on the U.S.G.S. Richmond topographic map, and are defined as City of Richmond parcel number W0000214010.

Boundary Justification

The boundaries of the nominated property have been drawn according to the legally recorded boundary lines to encompass the land area making up the property and the full extent of the significant resources including the historic three-story hospital, the attached five-story addition to the south, and the attached three-story addition to the west. There are no other contributing structures, buildings, or sites on the parcel.

